

7/12  
J. C.

WEMMH PTO/SB/21 (09-04)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/519,251
Filing Date	December 22, 2004
First Named Inventor	Ho Sung Kim
Art Unit	1712
Examiner Name	
Total Number of Pages in this Submission	5760-2

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement 1449 & 4 cited refs.  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Assignment & Recordation Form <input checked="" type="checkbox"/> Decl. for Utility app
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP		
Signature			
Printed Name	John V. Moriarty		
Date	28 JULY 05	Reg. No.	26,207

I hereby certify that this correspondence is being deposited with the United States Postal Service as **first class mail** in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on

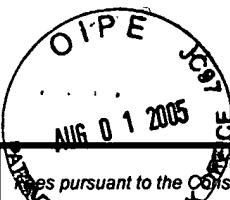
July 28, 2005

Date of Deposit or Transmission

John V. Moriarty

Name of Registered Representative

Date of Signature



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL For FY 2005

Effective on 12/08/2004.

Rules pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## Complete if Known

Application Number	10/519,251	
Filing Date	December 22, 2004	
First Named Inventor	Ho Sung Kim	
Examiner Name		
Art Unit	1712	
TOTAL AMOUNT OF PAYMENT	(\$)	40.00
Attorney Docket No. 5760-2		

### METHOD OF PAYMENT (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account number: 23-3030 Deposit Account Name: Woodard, Emhardt, Moriarty, McNett & Henry LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  
under 37 CFR 1.16 and 1.17

Credit any overpayments.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
-20 or HP	=	x	=	Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Fee (\$)	Fee Paid (\$)
x	=

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 or HP	=	x	=

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R. 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100	=	/50 = (round up to a whole number)	x	

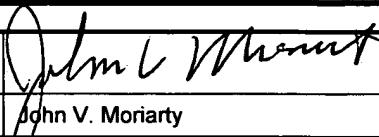
### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Assignment Fee

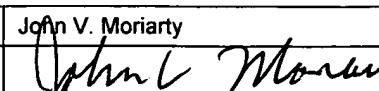
Fee Paid (\$)
40.00

### SUBMITTED BY:

Signature		Registration No.: (Attorney/Agent)	26,207	Telephone:	(317) 634-3456
Name (Print/Type):	John V. Moriarty			Date:	July 28, 2005

### CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:

Name (Print/Type)	John V. Moriarty		
Signature		Date	July 28, 2005



#356327

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent )  
application of: ) Before the Examiner  
Ho Sung Kim et al. )  
Serial N. 10/519,251 )  
Filed December 22, 2004 ) Group Art Unit 1712  
TOUGHENING OF THERMOSETS ) July 28, 2005

**NOTICE TO FILE DOCUMENTS**

Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

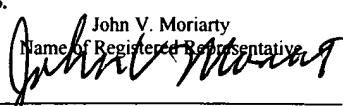
Sir:

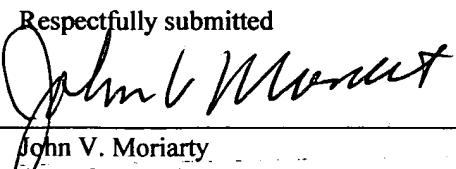
Please file the following documents:

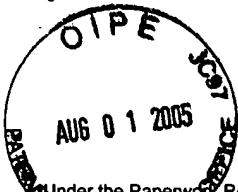
- (1) Declaration for Utility or Design Patent Application;
- (2) Assignment and Assignment Recordation Fee;
- (3) Information Disclosure Statement, three foreign references, one publication and PTO Form 1449; and
- (4) PTO Form 2038 charging the Assignment fee of \$40.00.

It is believed the application is in condition for examination and such action by the Examiner is respectfully requested.

If any additional fees are deemed necessary, please charge said fees to Deposit Account No. 23-3030, but not to include the payment of any issue fee.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 28, 2005.	
John V. Moriarty Name of Registered Representative	
	
Signature	
28 JU 2005	
Date of Signature	

Respectfully submitted  
  
By: \_\_\_\_\_  
John V. Moriarty  
Reg. No. 26,207  
Woodard, Emhardt, Moriarty,  
McNett & Henry LLP  
Bank One Center/Tower  
111 Monument Circle, Suite 3700  
Indianapolis, Indiana 46204-5137  
(317) 634-3456



000105-000001.JVM.318586  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it contains a valid OMB control number.

## **DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)**

Declaration Submitted With Initial Filing       Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)  
OR

Attorney Docket Number	<b>5760-2</b>
First Named Inventor	<b>Ho Sung KIM</b>
COMPLETE IF KNOWN	
Application Number	<b>10/519,251</b>
Filing Date	<b>December 22, 2004</b>
Art Unit	<b>1712</b>
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### **TOUGHENING OF THERMOSETS**

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 12/22/2004 as United States Application Number or PCT International

Application Number 10/519,251 and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PS3238	AU	06/27/2002		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under U35 USC 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



000105-000001.JVM.318586

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it contains a valid OMB control number.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
PCT/AU03/00821	06/27/2003	

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number	30565	Place Customer Number Bar Code Label Here
OR		
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below.		

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information Sheet PTO/SB/02C attached hereto.

Direct all correspondence to:  Customer Number Bar  
Code Label      30565      OR  Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:  A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any])

Family Name or Surname

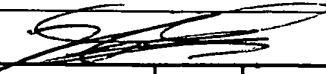
Ho Sung

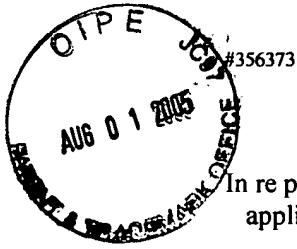
KIM

Inventor's Signature						Date	ji Jan 2005	
Residence	City	New South Wales	State		Country	Australia	Citizenship	Australian
Post Office Address	148 Grinsell Street							
Post Office Address	Kotara							
City	New South Wales	State		ZIP	2289	Country	Australia	

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
PTO/SB/02A

Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name (first and middle [if any])				Family Name or Surname				
Nam Ho		KIM						
Inventor's Signature						Date	<i>11 JAN 05 11/01/05</i>	
Residence	City	New South Wales	State		Country	Australia	Citizenship	Australian
Post Office Address	C/- Department of Mechanical Engineering							
Post Office Address	The University of Newcastle, Callaghan							
City	New South Wales		State		ZIP	2038	Country	Australia
Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature						Date		
Residence	City		State		Country		Citizenship	
Post Office Address								
Post Office Address								
City			State		ZIP		Country	
Name of Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.						
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature						Date		
Residence	City		State		Country		Citizenship	
Post Office Address								
Post Office Address								
City			State		ZIP		Country	



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re patent )  
application of: ) Before the Examiner  
Ho Sung Kim et al. )  
Serial No. 10/519,251 )  
Filed December 22, 2004 ) Group Art Unit 1712  
TOUGHENING OF THERMOSETS ) July 28, 2005

**INFORMATION DISCLOSURE STATEMENT**

Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Pursuant to the duty of disclosure embodied in 37 C.F.R § 1.56 and 1.98,  
Applicants disclose the following references on the attached Information Disclosure  
Citation Form. This information has not been previously submitted in this application  
by the applicants.

The filing of this information Disclosure Statement shall not be construed as  
an admission that the information cited is, or is considered to be, material to  
patentability as defined in §1.56(b) or that any information cited is prior art to the  
present invention.

This Statement is being submitted before the mailing of a First Office Action  
on the merits, therefore no fees are believed due for consideration of the enclosed

references. The Commissioner is authorized to charge any additional fees or credit any overpayment to Deposit Account No. 23-3030, but not to include any payment of issue fees.

Respectfully submitted

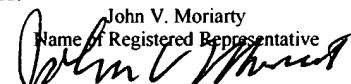
By:

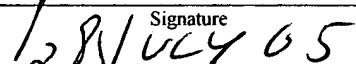
  
John V. Moriarty

Reg. No. 26,207

Woodard, Emhardt, Moriarty,  
McNett & Henry LLP  
Bank One Center/Tower  
111 Monument Circle, Suite 3700  
Indianapolis, Indiana 46204-5137  
(317) 634-3456

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on **July 28, 2005**.

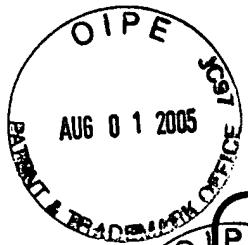
  
John V. Moriarty  
Name of Registered Representative

  
28/V/CY/05

Date of Signature

**\*Examiner:** initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

#356371



**Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB number.**

Approved for use through 10/31/2003 OMB 0651-0031

Approved for use through 10/31/2002. OMB 0651-0031  
Form 1010-GT - U.S. DEPARTMENT OF COMMERCE

# **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

AUG 1 2003

— 8 —

1 of 1

*Complete if Known*

Application Number	10/519,251
Filing Date	December 22, 2004
First Named Inventor	Ho Sung Kim
Group Art Unit	1712
Examiner Name	
Attorney Docket Number	5760-2

#### **OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS**

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. #356372

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comment on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.

**DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.**